BIRCH, STEWART, KOLASCH & BIRCH, LLP P.O. Box 747 • Falls Church, Virginia 22040-0747

PLEASE NOTE: YOU MUST COMPLETE THE **FOLLOWING**

Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that; my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:	APPARATUS FOR DETECTING CHEMOTAXIS OF CELLS										
Fill in Appropriate			ereto. If not attached h								
Information -	the specification was filed onas										
For Use Without	United States Application Number :										
Specification Attached:	and amended on				(if applicable) and/or						
	the specification was filed on		At	April 8, 2004 PCT/JP2004/005088		as PCT					
	International Application Number amended on		rPC1	PCT/JP2004/005088		; and was (if applicable)					
			1 1 1 1 1 1				• '				
	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.										
	I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federa Regulations, §1.56.										
	I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one										
	year prior to this application, that the same was not in public use or on sale in the United States of America more than one year										
	prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the										
	date of this application in any country foreign to the United States of America on an application filed by me or my legal representative or assigns more than twelve months (six months for designs) prior to this application, and that no application for										
	patent of inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this										
	application by me or my legal representatives or assigns, except as follows										
	I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:										
nsert Priority	Prior Foreign Application(s)					Priority (Claimed				
nformation:	JP2003-105197	Japan		April 9, 20	003						
if appropriate)	(Number)	(Country)		(Month/Day/	Year Filed)	Yes	No				
				•	·						
	(Number)	(Country)		(Month /Day /	Voss Eiled)	□ ¥					
	(I valitibel)	(Country)		(Month/Day/	rear rued)	Yes	No				
	(Number)	(Country)		(Month/Day/	Year Filed)	Yes	No				
	(Number)	(Country)		(Month/Day/	Year Filed)	⊔ Yes	No				
	,	, ,,,			•						
	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional applications(s) listed below.										
nsert Provisional											
Application(s):	(Application Number)			(Filing Date	<i>a</i>)						
if any)	(i ipplication i value)			(1 mig Date	=)						
		_									
	(Application Number) (Filing Date)										
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:										
	Country		Application Number	Γ	Date of Filing (Month	n/Day/Year)					
nsert Requested											
nformation:	· · · · · · · · · · · · · · · · · · ·				•						
if appropriate)											
	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s) listed below and,										
	insofar as the subject	matter of each	of the claims of this a	application is not d	isclosed in the prio	r United States	and/or PCT				
	insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available										
	between the filing date of the prior application and the national or PCT international filing date of this application.										
	bottied are iming date	or the prior upp	neudori aria die manori	a or i er intermiden	iai imig date of this	application.					
nsert Prior U.S.	// 11										
pplication(s): fany)	(Application Number) (Filing De		(Filing Date)	Date) (Status - patented, p		pending, abandoned)					
<i>,</i>											
_	(Application Number)		(Filing Date)		Status - patented, pe	nding abandon	ed)				
age 1 of 2 Rev. 12/19/01)	(-FF		((g =(r)	(-	mus · paterneu, pe	rianie, abandon	icu)				

I hereby appoint the practitioners at CUSTOMER NO. 2292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

BIRCH, STEWART, KOLASCH & BIRCH, LLP or CUSTOMER NO. 2292

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PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of First or Sole Inventor:	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*							
Full Name of First or Sole Inventor: Insert Name of Inventor → Insert Date This Document is Signed	Shiro KANEGASAKI	Thiso Longo=	,	June 20, 20						
Insert Residence Insert Citizenship →	Residence (City, State & Country)		CITIZENSHI	IP						
	Meguro-ku, Tokyo, Japan		Japan							
Insert Mailing Address →	MAILING ADDRESS (Complete Street Address including City, State & Country)									
	211, 2-3, Komaba 4-chome, Mequro-k	tu, Tokyo 153-0041 Japan								
Full Name of Second Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*						
	Residence (City, State & Country)		CITIZENSHI	IP						
	MAILING ADDRESS (Complete Street Address	1								
Full Name of Third	GIVEN NAME/FAMILY NAME	INTERITORIC CICNIATURE		T. D. A. COUNTY						
Inventor, if any: see above	GIVEN NAME/ FAMILI NAME	INVENTOR'S SIGNATURE		DATE*						
	Residence (City, State & Country)		CITIZENSHI	P						
	MAILING ADDRESS (Complete Street Address including City, State & Country)									
Full Name of Fourth	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE:						
Inventor, if any: see above	GIVEN WAVE, TAVILLY WANTE	INVENTORSSIGNATURE		DATE*						
	Residence (City, State & Country)		CITIZENSHIP							
	MAILING ADDRESS (Complete Street Address including City, State & Country)									
Full Name of Fifth	CHIPM MANUF JE ANGLIVANANCE									
Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*						
	Residence (City, State & Country)	CITIZENSHIP								
	MAILING ADDRESS (Complete Street Address									
Full Name of Sixth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*						
	Residence (City, State & Country)	CITIZENSHIP								
	MAILING ADDRESS (Complete Street Address	s including City, State & Country)								

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